

<h1 style="margin: 0;">FEE TRANSMITTAL</h1>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/585,660
		Filing Date	May 8, 2008
		First Named Inventor	Kazuhiro ATSUMI
		Examiner Name	M. Woodall
		Art Unit	2618
TOTAL AMOUNT OF PAYMENT		(\$)	180.00
		Attorney Docket No.	046884-5494-00-US-228671

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	Deposit Account Number: <u>50-0573</u> Deposit Account Name: <u>Drinker Biddle & Reath LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Small Entity		Small Entity		Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	380	190	620	310	250	125	_____
Design	250	125	120	60	160	80	_____
Plant	250	125	380	190	200	100	_____
Reissue	380	190	620	310	750	375	_____
Provisional	250	125	0	0	0	0	_____
2. EXCESS CLAIM FEES							
Fee Description						Small Entity	
						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						60	30
Each independent claim over 3 (including Reissues)						250	125
Multiple dependent claims						450	225
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
- or HP =		x	=	Fee (\$)		Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
- or HP =		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$310 (\$155 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 =	/50 =	(round up to a whole number) x	=				
				Fees Paid (\$)			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): <u>1806 Submission of an Information Disclosure Statement</u> <u>180.00</u>							

SUBMITTED BY			
Signature	Registration No. (Attorney/Agent)	33,818	Telephone 202.842.8886
Name (Print/Type): <u>John G. Smith</u>	Date	December 21, 2011	